Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:

86805

American Energy Corp -

STATUS:

Original

FACILITY:

Century Mine

PERMIT NUMBER:

01L00091\*GD

LOCATION: 4352

43521 Mayhugh Hill Rd Twp  $\,$  station code: Hwy 88

MONITORING

016

Beallsville, OH 43716

PERIOD:
REPORTING LAB:

2010-01-01 TO: 2010-01-31

COUNTY: DISTRICT:

Belmont SEDO

ANALYST:

NO DISCHARGE

AL

INDICATOR:

PARAMETER	Manganese, Total (Mn)						
PARAMETER COD							
UNITS	ug/l	··				<del>                                     </del>	
FREQUENCY	1 / 2 Weeks						
SAMPLING TYPE							
2010-01-01		······································		······································		İ	
2010-01-02					·	1	
2010-01-03					†	<del> </del>	
2010-01-04				,,,,, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	<del> </del>	1	
2010-01-05						<u> </u>	
2010-01-06							
2010-01-07					<b></b>	<u> </u>	
2010-01-08					<del> </del>	<del>                                     </del>	
2010-01-09					<del> </del>	<del> </del>	
2010-01-10			<b></b>		<u> </u>	<u> </u>	
2010-01-11					<u> </u>		<del></del>
2010-01-12	_			<del></del>			
2010-01-13						<u> </u>	
2010-01-14				·	<del> </del>	<u> </u>	
2010-01-15			<b> </b>				
2010-01-16							<del></del>
2010-01-17		***************************************					
2010-01-18							
2010-01-19							}
2010-01-20	1						
2010-01-21	<del>                                     </del>					<del></del>	
2010-01-22	-					***************************************	
2010-01-23							
2010-01-24			<b></b>				
2010-01-25			<del></del>				
2010-01-26							
2010-01-27			<u> </u>		,,,,,,,,,,,,,,		
2010-01-28							
2010-01-29					······································	·	
2010-01-30							
2010-01-31	<del></del>						
Minimum							
Maximum	+						
Average	<del>                                     </del>						
Count				.,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Name of Responsible Official or	Legitify under the construct for	that I have personally ever	med and am familiar with the	Signature of Respo	nsible Official or Authorized	Representative	Submission Date/Time
Authorized Representative christopher hudson	responsible for obtaining the information, I believe the submitted information is true, accurate						